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Application Number	10,659,866
Filing Date	9/11/03
First Named Inventor	Byron V. Olsen
Art Unit	1641
Examiner Name	J. Brun
Attorney Docket Number	51C-510

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number: 23,628 Please change the correspondence address for the above-identified application to: The address associated with Customer Number:23,628

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 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature Name Byron V. OlsenDate 5/19/06 Telephone (508) 370-5150

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

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